#### **Food Security**

| Contract Number:<br>Grantee Name |  | July-<br>Sept<br>2010 | Oct-<br>Dec<br>2010 | Jan-<br>Mar<br>2011 |
|----------------------------------|--|-----------------------|---------------------|---------------------|
| FTF-RC022-11-0294-02:            | Total number of food boxes distributed | 1657                  | 4331                | 4969                |
| Coalition for Compassion         | Number Other Items Distributed         | 3750                  | 4550                | 800                 |
| & Justice                        | Number of Children Served              | 375                   | 1353                | 1350                |
|                                  | Number of Families Served              | 350                   | 1225                | 1275                |

#### **Mental Health Consultation**

| Contract Number:<br>Grantee Name         |  | July-<br>Sept<br>2010 | Oct-<br>Dec<br>2010 | Jan-<br>Mar<br>2011 |
|--|--|-----------------------|---------------------|---------------------|
| FTF-STATE-10-0231-01:<br>Southwest Human | Total number of home based early care and education providers served by a Mental Health Consultant   | 0                     | 0                   | 1                   |
| Development                              | Total number of center based early care and education providers served by a Mental Health Consultant | 7                     | 12                  | 15                  |
|  | Total number of children served  | 27                    | 26                  | 237                 |
|  | Number of positive behavior support plans implemented  | 0                     | 7                   | 0                   |
|  | Number of Training Sessions  | 3                     | 2                   | 8                   |
|  | Number of teachers attending training session <sup>1</sup>   | 22                    | 13                  | 63                  |
|  | Number of children referred to clinical and assessment services                                      | 7                     | 4                   | 6                   |
|  | Number of families referred to mental health/ assessment services                                    | 3                     | 6                   | 6                   |
|  | Number of Directors referred to other services   | 8                     | 3                   | 10                  |
|  | Number of Teachers referred to other services  | 1                     | 1                   | 4                   |
|  | Number of Smart Support Consultants participating in continuing education                            | 4                     | 3                   | 4                   |

#### **Quality First Child Care Scholarships**

| Contract Number:<br>Grantee Name |         | July-<br>Sept<br>2010   | Oct-<br>Dec<br>2010 | Jan-<br>Mar<br>2011 |     |
|----------------------------------|---------|---|---------------------|---------------------|-----|
| FTF-MULTI-                       |         | Number of Providers served during the quarter                   | 17                  | 19                  | 21  |
| 11-0302-01:                      | Centers | Number of Families served during the quarter                    | 110                 | 126                 | 138 |
| Valley of the                    |         | Number of Infants/Toddlers served during the quarter            | 34                  | 46                  | 53  |
| Sun United                       |         | Number of Preschoolers served during the quarter                | 81                  | 89                  | 103 |
| Way                              |         | Number of children with Special Needs served during the quarter |                     | 9                   | 12  |
|                                  |         | Total number of children receiving scholarships                 | 124                 | 144                 | 168 |
|                                  |         | Number of Providers served during the quarter                   | 4                   | 4                   | 4   |
|                                  | Homes   | Number of Families served during the quarter                    | 16                  | 14                  | 13  |
|                                  |         | Number of Infants/Toddlers served during the quarter            | 6                   | 4                   | 4   |
|                                  |         | Number of Preschoolers served during the quarter                | 6                   | 9                   | 8   |
|                                  |         | Number of children with Special Needs served during the quarter | 4                   | 1                   | 2   |
|                                  |         | Total number of children receiving scholarships                 | 16                  | 14                  | 14  |

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<sup>&</sup>lt;sup>1</sup> This is the total number of all attendees. This is not an unduplicated count—each individual may attend multiple sessions.

### Scholarships T.E.A.C.H.

| Contract Number:<br>Grantee Name |   | July-<br>Sept<br>2010 | Oct-<br>Dec<br>2010 | Jan-<br>Mar<br>2011 |
|----------------------------------|---|-----------------------|---------------------|---------------------|
| GRA-STATE-10-0017-01             | Total number of participating scholars  | 15                    | 19                  | 12                  |
| Y3: Association for              | Statewide Quality First!                | 4                     | 7                   | 5                   |
| Supportive Child Care            | Regional Expansion Quality First!       | 6                     | 6                   | 5                   |
|                                  | Regional Partnership Council T.E.A.C.H. | 5                     | 6                   | 2                   |

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### **Community Based Training**

| Contract Number/ Grantee Name                         | Description                           | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|---|---------------------------------------|--|--|---|--|
| FTF-RC022-10-0070-03-Y2 / Youth<br>Count              | Quarterly Data Submission Status*     | 3                                      | 3  | 3                                       |  |
|   | Number of Sessions**                  | 42                                     | 45                                       | 44                                      |  |
|   | Total Adults Attending**              | 253                                    | 390                                      | 444                                     |  |
|   | Total Children Attending**            | 0                                      | 35                                       | 35                                      |  |
|   | Avg Adults Attending each Session**   | 6.0                                    | 8.7                                      | 10.1                                    |  |
|   | Avg Children Attending each Session** | 0.0                                    | 0.8                                      | 0.8                                     |  |
| Contract Number/ Grantee Name                         | Description                           | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
| GRA-RC022-11-0215-01 / Prevent Child<br>Abuse Arizona | Quarterly Data Submission Status*     |  | 3  | 3                                       |  |
|   | Number of Sessions**                  |  | 5  | 3                                       |  |
|   | Total Adults Attending**              |  | 43                                       | 21                                      |  |
|   | Total Children Attending**            |  | 0  | 0                                       |  |
|   | Avg Adults Attending each Session**   |  | 8.6                                      | 7.0                                     |  |
|   | Avg Children Attending each Session** |  | 0.0                                      | 0.0                                     |  |

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#### **Court Teams**

| Contract Number/ Grantee Name                            | Description   | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|--|---|--|--|---|--|
| FTF-RC022-10-0065-01-Y2 / Prevent<br>Child Abuse Arizona | Quarterly Data Submission Status*                           | 3                                      | 3  | 3                                       |  |
|  | Number of Court Team Training Sessions**                    | 2                                      | 3  | 4                                       |  |
|  | Total Participants Attending Training Sessions**            | 33                                     | 56                                       | 228                                     |  |
|  | Average Number of Participants Attending Each Session**     | 16.5                                   | 18.7                                     | 57.0                                    |  |
|  | Total Number of Children with a Court Team Checklist**      | 291                                    | 300                                      | 308                                     |  |
|  | Total Number of Children Served by<br>Court Team Programs** | 97                                     | 100                                      | 115                                     |  |
|  | Total Number of Court Team<br>Meetings**                    | 2                                      | 2  | 4                                       |  |
|  | Total Number of System Improvement Measures Implemented**   | 38                                     | 40                                       | 41                                      |  |

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#### **Home Visitation**

Regional Medical Center

| Contract Number/ Grantee Name                            | Description   | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|--|---|--|--|---|--|
| FTF-RC022-09-0039-01-Y2 / Verde<br>Valley Medical Center | Quarterly Data Submission Status*                       | 3                                      | 3  | 3                                       |  |
|  | Number of Families Served at End of Quarter**           | 51                                     | 56                                       | 54                                      |  |
|  | Number of Families NEWLY Enrolled During the Quarter**  | 3                                      | 6  | 6                                       |  |
|  | Total Families Served**                                 | 60                                     | 57                                       | 62                                      |  |
|  | Number of Children Served at End of Quarter**           | 70                                     | 77                                       | 77                                      |  |
|  | Number of Children NEWLY Enrolled During the Quarter**  | 2                                      | 5  | 2                                       |  |
|  | Number of Children Eligible for Screening**             | 10                                     | 10                                       | 21                                      |  |
|  | Number of Children Receiving Screening**                | 4                                      | 7  | 46                                      |  |
|  | Number of Children with Possible Delay Identified**     | 0                                      | 0  | <25                                     |  |
|  | Total FTE at the End of the Quarter**                   | 3.2                                    | 3.2                                      | 0.3                                     |  |
|  | Number of HV Meet Minimum<br>Educational Requirements** | 4                                      | 4  | 4                                       |  |
|  | Average FTE Caseload**                                  | 15.9                                   | 17.5                                     | 168.8                                   |  |
| Contract Number/ Grantee Name                            | Description   | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
| FTF-RC022-09-0094-01-Y2 / Yavapai                        | Quarterly Data Submission Status*                       | 3                                      | 3  | 3                                       |  |

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| Number of Families Served at End of Quarter**             | 67   | 76   | 65   |
|---|------|------|------|
| Number of Families NEWLY Enrolled<br>During the Quarter** | 28   | 13   | 10   |
| Total Families Served**                                   | 78   | 80   | 86   |
| Number of Children Served at End of Quarter**             | 70   | 76   | 73   |
| Number of Children NEWLY Enrolled<br>During the Quarter** | 28   | 13   | 10   |
| Number of Children Eligible for<br>Screening**            | 6    | 11   | 7    |
| Number of Children Receiving Screening**                  | 6    | 11   | 4    |
| Number of Children with Possible Delay Identified**       | 0    | 0    | 0    |
| Total FTE at the End of the Quarter**                     | 4.0  | 4.0  | 4.0  |
| Number of HV Meet Minimum<br>Educational Requirements**   | 4    | 4    | 4    |
| Average FTE Caseload**                                    | 16.8 | 19.0 | 16.3 |

| Contract Number/ Grantee Name                              | Description   | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|--|---|--|--|---|--|
| FTF-RC022-09-0095-01-Y2 / Arizonas<br>Children Association | Quarterly Data Submission Status*                         | 3                                      | 3  | 3                                       |  |
|  | Number of Families Served at End of Quarter**             | 14                                     | 10                                       | 13                                      |  |
|  | Number of Families NEWLY Enrolled<br>During the Quarter** | 5                                      | 6  | 8                                       |  |
|  | Total Families Served**                                   | 21                                     | 18                                       | 18                                      |  |
|  | Number of Children Served at End of Quarter**             | 12                                     | 13                                       | 21                                      |  |

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| Number of Children NEWLY Enrolled<br>During the Quarter** | 5   | 6   | 11  |
|---|-----|-----|-----|
| Number of Children Eligible for Screening**               | 1   | 1   | 5   |
| Number of Children Receiving<br>Screening**               | 6   | 7   | 8   |
| Number of Children with Possible Delay Identified**       | <25 | 0   | 0   |
| Total FTE at the End of the Quarter**                     | 1.5 | 1.5 | 1.5 |
| Number of HV Meet Minimum<br>Educational Requirements**   | 2   | 2   | 2   |
| Average FTE Caseload**                                    | 9.7 | 6.9 | 9.0 |

| Contract Number/ Grantee Name   | Description  | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|---|--|--|--|---|--|
| FTF-RC022-10-0011-01-Y2 / Yavapai<br>County Community Health Services | Quarterly Data Submission Status*                      | 3                                      | 3  | 3                                       | 2  |
|   | Number of Families Served at End of Quarter**          | 37                                     | 38                                       | 33                                      | 37                                       |
|   | Number of Families NEWLY Enrolled During the Quarter** | 12                                     | 15                                       | 11                                      | 5  |
|   | Total Families Served**                                | 42                                     | 52                                       | 49                                      | 41                                       |
|   | Number of Children Served at End of Quarter**          | 41                                     | 44                                       | 38                                      | 40                                       |
|   | Number of Children NEWLY Enrolled During the Quarter** | 13                                     | 20                                       | 11                                      | 6  |
|   | Number of Children Eligible for Screening**            | 0                                      | 3  | 4                                       | 2  |
|   | Number of Children Receiving Screening**               | 8                                      | 17                                       | 21                                      | 10                                       |
|   | Number of Children with Possible Delay Identified**    | <25                                    | <25                                      | <25                                     | <25                                      |

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| Total FTE at the End of the Quarter**                   | 1.0  | 1.0  | 1.0  | 1.0  |
|---|------|------|------|------|
|   |      |      |      |      |
| Number of HV Meet Minimum<br>Educational Requirements** | 1    | 1    | 1    | 1    |
| Average FTE Caseload**                                  | 37.0 | 38.0 | 33.0 | 37.0 |

|   | ·   |  |  |   |  |
|---|---|--|--|---|--|
| Contract Number/ Grantee Name                               | Description   | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
| FTF-RC022-10-0070-02-Y2 / Arizona's<br>Children Association | Quarterly Data Submission Status*                         | 3                                      | 3  | 3                                       |  |
|   | Number of Families Served at End of Quarter**             | 11                                     | 12                                       | 17                                      |  |
|   | Number of Families NEWLY Enrolled During the Quarter**    | 3                                      | 3  | 7                                       |  |
|   | Total Families Served**                                   | 13                                     | 16                                       | 21                                      |  |
|   | Number of Children Served at End of Quarter**             | 15                                     | 17                                       | 20                                      |  |
|   | Number of Children NEWLY Enrolled<br>During the Quarter** | 4                                      | 4  | 7                                       |  |
|   | Number of Children Eligible for Screening**               | 2                                      | 3  | 1                                       |  |
|   | Number of Children Receiving Screening**                  | 14                                     | 14                                       | 13                                      |  |
|   | Number of Children with Possible Delay Identified**       | <25                                    | <25                                      | <25                                     |  |
|   | Total FTE at the End of the Quarter**                     | 1.0                                    | 1.0                                      | 1.0                                     |  |
|   | Number of HV Meet Minimum<br>Educational Requirements**   | 1                                      | 1  | 1                                       |  |
|   | Average FTE Caseload**                                    | 11.0                                   | 12.0                                     | 17.0                                    |  |

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#### **Parent Kit**

| Contract Number/ Grantee Name                       | Description           | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|---|-----------------------|--|--|---|--|
| GRA-STATE-10-0025-01-Y3 / Susan Fry<br>& Associates | Total English Cases** | 15                                     | 21                                       | 18                                      |  |
|   | Total Spanish Cases** | 3                                      | 2  | 1                                       |  |
|   | Total Cases**         | 18                                     | 23                                       | 19                                      |  |
|   | Total Kits**          | 216                                    | 276                                      | 228                                     |  |

### **Quality First - Regional Funding**

| Contract Number/ Grantee Name                            | Description                               | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|--|---|--|--|---|--|
| FTF-STATE-10-0001-02-Y3 / Southwest<br>Human Development | Number of center based providers served** | 12                                     | 12                                       | 13                                      |  |
|  | Number of home based providers served **  | 3                                      | 2  | 2                                       |  |
| Contract Number/ Grantee Name                            | Description                               | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
| FTF-STATE-10-0002-01-Y3 / Valley of the Sun United Way   | Number of center based providers served** | 12                                     | 12                                       | 13                                      |  |
|  | Number of home based providers            | 3                                      | 2  | 2                                       |  |

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served \*\*

#### **Quality First - Statewide Funding**

| Contract Number/ Grantee Name                            | Description                               | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|--|---|--|--|---|--|
| FTF-STATE-10-0001-02-Y3 / Southwest<br>Human Development | Number of center based providers served** | 7                                      | 7  | 7                                       |  |
|  | Number of home based providers served**   | 2                                      | 2  | 2                                       |  |

| Contract Number/ Grantee Name                          | Description                               | First Fiscal<br>Quarter<br>(July-Sept) | Second<br>Fiscal<br>Quarter<br>(Oct-Dec) | Third<br>Fiscal<br>Quarter<br>(Jan-Mar) | Fourth<br>Fiscal<br>Quarter<br>(Apr-Jun) |
|--|---|--|--|---|--|
| FTF-STATE-10-0002-01-Y3 / Valley of the Sun United Way | Number of center based providers served** | 7                                      | 7  | 7                                       |  |
|  | Number of home based providers served **  | 2                                      | 2  | 2                                       |  |

#### Key to report information

#### \*Quarterly Data Submission Status (Single Asterisk)

Null (empty box) = Grantee was not contracted for this reporting period (reporting period = one quarter)

Null (empty box) with Quarterly Data displayed signifies that grantee does not submit data through PGMS but via other means

- 0 = No reports for this quarter were submitted
- 1 = Quarterly data based upon a partial submission of 1 months data
- 2 = Quarterly data based upon a partial submission of 2 months data
- 3 = Quarterly data based upon a full quarter of data provided

#### \*\*Quarterly Data Submission Value (Double Asterisk)

Null (empty box) = Grantee reported that this is not part of the grantee's contract and did not provide data. Any other numeric entry (zero or greater) indicates a number reported by grantee.